

3

THE TRUSTEES

OF THE

MASSACHUSETTS GENERAL HOSPITAL,

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THE undersigned Trustees of the Massachusetts General Hospital are again compelled by an imperious sense of duty to supplicate in behalf of that interesting object of charity. It is now two years since they spread before the public the situation and exigencies of this institution.

In addition to the facts and general course of reasoning then communicated, it is the melancholy duty of the Trustees to state that cases are continually presented to their knowledge, indicating that the want of such an institution is not only necessary but imperious.

Every day new instances are occurring of lives sacrificed, of loss of reason, and of usefulness occasioned or protracted, and of diseases, at first easily curable, becoming fixed and fatal, by the impracticability of providing, by private and occasional charities, for the accommodation requisite to effect convalescence. Letters are subjoined, illustrative of these facts, and calculated to place in a strong point of view the necessity of such an institution. From considerations solely of personal or professional delicacy, the names both of the writers and of the patients are concealed, but the Trustees pledge themselves that the statements are from men, in their characters, private as well as professional, equal to any in the Commonwealth.

The present circumstances of the institution and of the times authorize the Trustees to vary the principle,

on which subscriptions were heretofore solicited. The legislature having, at the last session, so modified its donation of the Province House as to render it permanently independent of any specific amount of bequest, within any prescribed period, by individuals, the Trustees are now authorized and prepared to receive donations and to commence the establishment as soon as a sufficient sum authorizing such a step shall have been subscribed, and on a scale proportioned to the means, furnished by the contributors.

As it was found, on the former application to the public, that a diversity of sentiment prevailed in the community in relation to the different objects for whose relief a General Hospital is intended to apply, in the plan now offered the subscriber is at liberty to designate the particular object to which he prefers that his subscription should be appropriated.

If the subscription be for the use of the General Hospital, without other limitation, it will be considered and applied by the Trustees to the use of the General Hospital, in any of its branches or departments, at their discretion.

If on the contrary the subscription be for the hospital for the sick, or for the hospital for the insane, the Trustees pledge themselves to the public and to the subscribers that the amount of such specific benefaction shall be sacredly applied to the particular object designated, and for that purpose shall be kept distinct in their books and in all their general arrangements; and that they will proceed to commence that branch

of the Hospital which the discrimination of private munificence shall thus designate as the most worthy or interesting object of general benevolence. It being the purpose of the Trustees, should the amount of their funds authorize it, to keep these two branches of a General Hospital distinct, in separate buildings and under separate management, and in locations sufficiently distant, to preclude all inconvenience from each other.

The Trustees look with confidence for success in the present application, to the liberal and discriminating spirit of the citizens of the Commonwealth. They hope and earnestly solicit the support of the enlightened and charitable in all parts of Massachusetts. And in pursuance of this hope, they have taken the liberty to select, in different sections of the State, individuals to whose particular attention and patronage they have committed the solicitations of subscriptions in their vicinity, and from whom they request an early communication of the result of their exertions.

T. H. PERKINS,
JOSIAH QUINCY,
DANIEL SARGENT,
JONATHAN PHILLIPS,
JOHN L. SULLIVAN,
RICHARD SULLIVAN,

TRISTRAM BARNARD,
GEORGE G. LEE,
FRANCIS C. LOWELL,
JOSEPH MAY,
JOSEPH TILDEN,
GAMALIEL BRADFORD.

To a member of the Board of Trustees.

DEAR SIR,

I HAVE been requested by a friend, who takes a great interest in the establishment of a hospital here, to make minutes of some of those cases which so often present themselves as the objects of such an institution, and to communicate the same to you. While I can say, with truth, that few days pass over my head in which I do not feel the deepest regret that such a means of relieving distress does not exist; yet I have experienced considerable reluctance in speaking of those details of private practice which it is thought necessary to mention. When, however, it has been urged that private feeling should be made to yield to a public and most important interest, I have at length consented to trouble you with a few cases of disease in one department of the medical profession, which are perhaps not the most striking, and which I have mentioned without the addition of any of those circumstances that are calculated to excite compassion. The number which I have mentioned is necessarily very limited; but I can assure you that instances of as great suffering are occasionally witnessed by almost every physician I know, and that in my own experience such instances are constantly arising in a succession which is truly painful. Among all these, it is difficult to select such as are best fitted to display the extent of the misery of the sick poor, and I shall therefore mention those which most readily occur.

At this moment, there present themselves two poor patients, one of whom applied to me to-day, the other yesterday, who are both affected with the same disease, and both curable under proper management; but I fear neither of them under existing circumstances. One of them is a very decent hard labouring black, of this town, who has a family. This man has entirely lost the sight of one eye, and is fast losing that of the other, and will soon be totally blind. If I attempt an operation on this man, it must be done in a small, dark, and close room; and there the patient must remain two or three weeks, exposed to light, heat, and confusion, either of which would, perhaps, be sufficient to defeat the best operation. What is to be done in this case? I have no alternative, but to perform the operation and leave the rest to accident.—The other is a boy from a remote town with the same disease, in the most favourable state for operation. I offered to cure him without any expense, if he would get boarded in town three weeks; but his poverty was such as to discourage him from remaining; and he will undoubtedly be taken back, without the operation.* In some of these cases the operation has been performed with complete success; but the bad situation of the patient afterwards has exposed him to circumstances which have brought on inflammation and completely defeated the operation. These

* It gives me pleasure to mention that a very benevolent and respectable gentleman, on knowing the case of this boy, offered to assist him as far as possible; but unfortunately he was already beyond my reach.

instances of loss of sight by cataracts are so numerous, that hardly any of us ought to consider himself exempt from the danger of the disease at some period of life, and of consequence we may be more ready to feel for those who suffer this dreadful privation.

A short time since a person applied to me with a cancerous swelling, on examining, I found the complaint could be cured by an immediate operation; but that if it was deferred the cancerous poison would extend too deep to be eradicated. On communicating this to the patient, he said that his only objection was poverty; that he lived in the country, and had no friends nor acquaintance here to whom he could apply. I advised him to look round, as I had no doubt he could get accommodated in some way; he left me and has not since appeared; so that by this time his case must be irrecoverable.

It is not long since a man came to me from the District of Maine, which he had quitted for the express purpose of putting himself under my care, to get cured of one of the most difficult, painful, and yet frequent diseases; a stricture in the urethra, or obstruction in the urinary passages. He communicated his case to me with remarkable intelligence and precision; and informed me he had been under the care of various practitioners in remote places, who for want of that kind of habit acquired by practice, which is peculiarly necessary in this complaint, had not been able to make any progress in the cure. I found his case would require a regular treatment of between two

and three months; and after much discussion, and finding him unable to pay, although his case required considerable time, I agreed to attend him gratuitously. After a great deal of trouble and many efforts to make proper arrangements, he finally told me that he must go home and die, as it was impossible for him to remain here. I gave him the best directions I could; but firmly believe he must perish; though not until after a year or two of miserable suffering.

It has been my lot to be called on to perform the operation for the stone in the bladder four times on poor patients. They were all, as it happened, wretchedly indigent, and suffered extremely for want of proper accommodations; so that though they actually recovered, I thought it almost miraculous that either of them escaped with his life. If four more patients should present under similar circumstances, the probability would be that two, at least, would die for want of good nursing.

A very common case of misfortune is that of white swelling and with this may be connected other diseases of the joints. These can be cured, at an early stage and regularly attended; but the poor when attacked with these complaints have no asylum where they can remain quiet a number of months and submit to the necessary treatment; they therefore resist the disease so long, that it becomes incurable, and then suffer the loss of a limb, or of life.

The instances of misfortune alluded to, though few in comparison to what are actually witnessed, will per-

haps serve as a specimen of the numerous cases of suffering from diseases in the midst of poverty. There are also cases which might be relieved by a hospital, and which are not relievable by any other means than those such a benevolent institution would afford.



To a Member of the Board of Trustees.

Boston, March 21st, 1816.

DEAR SIR,

IN consequence of the conversation lately had with you, I am induced to send you a few of the facts which occur to me at the present moment, as tending to illustrate the necessity of a General Hospital, and the incompetency of any institutions at present existing among us, to supply its deficiency.

During three years, in which I was a physician to the Boston Dispensary, I was obliged to witness frequent and melancholy instances of the effects produced among the lower classes of society, by a combination of poverty and sickness. The Dispensary provides medicines and medical attendance to the sick, but nothing more. It has not the means of affording relief to many of the most urgent wants of destitute patients. The Dispensary physician is often called to persons suffering extreme distress, to whom he can afford no medical relief, because no medicines are remedies for cold and hunger.

I have visited patients in the most obscure and miserable hovels, without fire, and with the snow driving in at a multitude of crevices; and yet have been told, that even this shelter must be abandoned because the last week's rent had not been paid. It is not uncommon for physicians to avail themselves of a privilege in the dispensary to prescribe a few ounces of arrow root or sago to patients, suffering from want of nourishment; where bread and meat would have answered the purpose infinitely better. It has been even necessary to spend time in endeavouring to impress upon the minds of feverish and bewildered patients, the time and quantities in which to take their own medicines; because not a single attendant was to be found, who could be intrusted with this charge. Even where the interference of the charitable has been obtained, its intentions have been frequently misapplied or frustrated, by the indiscretion of the patient's friends, the dishonesty of attendants, and above all by the intemperance of husbands and parents.

Cases of this sort, it is obvious, admit of no direct relief, except by placing the patient in a situation, where he can be insured the comforts and attendance which his condition requires, and where the control of arrangements respecting him, can be placed in the hands of proper persons.

Many instances of individual distress might be brought to exemplify the above statements. I will however mention only one, which is of a nature still different. I was called in October last, to visit Mr. —, who had

a large family ; his wife had been recently and dangerously sick. He had been long known by his employers and neighbours, as a man of industry, punctuality, and the most regular habits. He had been able to support his family in a very decent and comfortable manner. When I saw him, he had been taken suddenly insane, and was raving violently. He made a determined resistance to all attempts at confining him, became outrageous, and repeatedly escaped, not without danger to his family and others. The situation of his wife rendered it impossible that he should be kept at home, and as there were no means of defraying his board in an expensive situation he was carried to the Boston alms-house. There he was lodged in a small, dark and uncomfortable cell, without fresh air, and hardly long enough to allow him to lie down. In this situation he refused food, and was found every morning sitting naked on the straw of his crib, having divested himself of clothes during the night. He became rapidly emaciated and his strength sunk so far, that it was found necessary to remove him to the sick room, to save his life. By the humane attentions of the physician of the house, he recovered strength enough to be taken out and carried to the house of a relative, but his family having no means to support him or themselves, their situation became very wretched. At this time I furnished a statement of his case, which was presented to some charitable individuals, who subscribed about \$100 for his relief. On the strength of this he was sent to Andover, where he remained at the

last accounts. The sum subscribed will support him five or six months, at the end of which time should his lunacy continue, he must again become a miserable object of uncertain charity.

With my sincere hopes that your benevolent exertions may be successful in providing an asylum for the distressed,

I am, &c.



To a Member of the Board of Trustees.

Boston, March 20th, 1816.

DEAR SIR,

I COMPLY with great pleasure with the request made me in the course of conversation yesterday.

The cases in surgery which have appeared to me, from my own practice, to require in a very particular manner the medical attentions of a hospital, were those which were occasioned by accidents, falls, wounds, &c. Almost all the cases of this kind which have fallen under my notice, or care, have happened to the labouring class of the community—to men who in perfect health, have been able to procure only the absolute necessaries of life, and who have not only been cut off from the ordinary means of support, in consequence of the injury they have suffered, but have wanted most of the necessaries of sickness. The most unfortunate part of their lot however has been, that at the moment they

have met with any severe injury, the immediate spectators in the exercise of benevolence have hurried them at once to some most unsuitable place for the purpose of operation, and as soon collected medical gentlemen from all parts of the town to afford assistance. Surgical skill of course in such confusion can hardly be taken into the account, and to a greater certainty, under such circumstances, can it hardly be exerted if possessed.

Thus in an instance which fell under my notice recently, I witnessed the operation of trepanning in a part of the head most difficult for the operation, in a low room with no windows in it, and during a storm of rain and wind which made it necessary to keep the door nearly closed. The patient was extended on a low seaman's chest, and the surgeon kneeling in order to reach his patient. The patient, a fine looking, promising young sailor, died that night. Nothing can exceed the confusion that necessarily attended the whole of the operation. A great crowd, which it was impossible to disperse, the darkness, a total want of proper dressings, and various other circumstances, tended most powerfully to diminish the few chances the case afforded for relief. Now how much might have been done in a well regulated hospital, in a case which under existing circumstances could not have been attempted? A case of *mania* has recently come under my notice, accompanied by circumstances peculiarly distressing. The patient, a male, was, before the occurrence of mania, remarkable for his industry and the

comfortable circumstances in which it placed him. His wife suffered a tedious and dangerous confinement with her last child. Her husband however was remarkably self-possessed, and waited with great composure the termination of her illness. This at length was terminated favorably. A very short time after this, her husband was seized with furious mania, and escaped naked from the house. He was soon secured at the house of his mother, a few doors from his own abode. From this time till he was removed, his miserable wife, very much reduced by her illness, was within hearing of his perpetual shrieks and imprecations. This man is now in consequence of an extraordinary exertion of benevolence at an asylum for the insane in a neighbouring town. It is impossible to say in the present instance how far this case admitted of an early cure. But probably if this man had at once been removed to an asylum, where he might have received those attentions, without which in such a case the best medical treatment will often fail, this industrious individual might long before this period, have been restored to his friends, and a large family been supported by his industrious exertions. I have this day learnt that this man is in a way to recovery.

A case of what was called *spotted fever*, occurred some time since in my practice. The patient, a strong athletic man, having no connections in town, lived at board at a miserable house on a wharf. He was seized on the second day of the fever with delirium. His only attendant was a woman, with a family of small

children about her. It was utterly impossible to afford medical assistance in this case, with a shadow of probability that it would be successful. Nursing was out of the question. This man died in five days.

I will not trouble you, sir, with any more details. I can only most ardently hope that your benevolent purposes will be most perfectly successful.

